Docket No. P214

## **Declaration and Power of Attorney For Patent Application**

## **English Language Declaration**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD OF ON -LINE CREDIT INFORMATION MONITORING AND CONTROL							
the specification of which							
(check one)							
X	is attached hereto.						
	was filed on		as United States Application	No. or PCT International			
	Application Number						
	and was amended on _						
			(if applicable)				
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.						
I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.							
I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.							
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

LOUIS L. DACHS REG. NO. 26,858

**ALAN R. DAVIS, REG. NO. 26,862** 

Send Correspondence to:

ALAN R. DAVIS

14619 LA MAIDA STREET

**SHERMAN OAKS, CALIFORNIA 91403** 

Direct Telephone Calls to: (name and telephone number)

(818) 906-7744

Full name of sole or tost inventor SHELDON HASOWER	
Sole or first inventor symple Olever	× 9/22
Residence	1100
163 BELL CANYON ROAD, CANOGA PARK, CALIFORNIA 91304	$\iota$
Citizenship	
USA	
Post Office Address	
SAME	

Full name of second inventor, if any	
Second inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS - INDEPENDENT INVENTOR						Docket No. P215	
Serial	No.	Filin	g Date	Patent No.		Issue Date	
UNKNOWN		UNK	NOWN	UNKNOWN		UNKNOWN	
Applicant/ SHELDON KASOWER Patentee:							
Invention: METHOD OF ON-LINE CREDIT INFORMATION MONITORING AND CONTROL							
		·					
As a below named inventor, I hereby declare that I qualify as a small entity person as defined in 37 CFR 1.27(a)(1) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled above and described in:							
🗵 the	specification	to be filed here	with.				
☐ the	application id	entified above.					
☐ the	patent identifi	ied above.					
I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person, small business concern, or nonprofit organization who could not be classified as a small entity under section 41(a) and (b) of Title 35, United States Code.							
Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:							
<ul> <li>□ No such person, concern or organization exists.</li> <li>☑ Each.such person, concern or organization is listed below.</li> </ul>							
*NOTE: Separate verified statements are recommended from each named person, concern or organization having rights to the invention averring to their status as small entities.							
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I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.27(g)(2))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF INVENTOR SHELDON KASOWED SIGNATURE OF INVENTOR	DATE: × 9/30/0
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## VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY Docket No. STATUS - SMALL BUSINESS CONCERN P215 Serial No. Filing Date Patent No. Issue Date **UNKNNOWN UNKNOWN UNKNOWN KNOWN** Applicant/ SHELDON KASOWER Patentee: Invention: METHOD OF ON-LNE CREDIT INFORMATION MONITORING AND CONTROL I hereby declare that I am: the owner of the small business concern identified below: an official of the small business concern empowered to act on behalf of the concern identified below: NAME OF CONCERN: MIGHTY NET, INCORPORATED ADDRESS OF CONCERN: 9040 TOPANGA CANYON BLVD, CANOGA PARK CA 91304 I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR part 121 and 37 CFR 1.27(a)(2) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both. I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the above identified invention described in: M the specification filed herewith with title as listed above. The application identified above. The patent identified above. If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small entity person under 37 CFR 1.27(a)(1) or by any concern which would not qualify as a small business concern under 37 CFR 1.27(a)(2) or a nonprofit organization under 37 CFR 1.27(a)(3).

obligation unde	er contract of	or law to ass	ign, grant, conv	nave assigned, granted, c vey, or license any rights ir kists. is listed below.	conveyed, or lic n the invention	censed or am under an is listed below:
FULL NAME _				Small Business Concern		Nonprofit Organization
FULL NAME ADDRESS		Individual				
FULL NAME		Individual	<u> </u>	Small Business Concern		Nonprofit Organization
ADDRESS FULL NAME		Individual		Small Business Concern		Nonprofit Organization
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NAME OF PER			SHELDON H	CASOWER		
TITLE OF PERSON SIGNING OTHER THAN OWNER: ADDRESS OF PERSON SIGNING:			CHAIRMAN AND CHIEF EXECUTIVE OFFICER  9040 TOPANGA CANYON BLVD  CANOGA PARK CA 91304			
SIGNATURE:	B	HU	M	DA	te: <u>% 9</u> /	20/03